

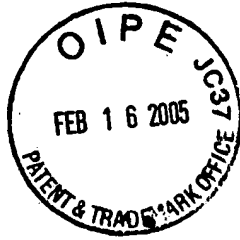
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:  
Willibrord A. Groten

Serial No.: 10/015,863

Filed: 12/12/2001

For: Process for Sulfur Reduction in Naphtha Streams



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Atty File: CDT 1756-2

Group Art Unit: 1764

Examiner: W.D. Griffin

PETITION FOR EXTENSION OF TIME

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In accordance with 37 CFR 1.136(a) applicant requests an extension of ONE (1) month to 02/18/2005 to file a response, which was originally due 01/18/2005. This petition is made within the first month. A check for \$120.00 (other than small entity) to cover the fee is enclosed.

Respectfully submitted,

Kenneth H. Johnson  
ATTORNEY FOR APPLICANT  
Reg. No. 22,966  
P.O. Box 630708  
Houston, Texas 77263  
TEL: (713)780-7047  
FAX: (713) 780-7671

02/17/2005 YPOLITE1 00000026 10015863

01 FC:1251

120.00 OP

MAIL CERTIFICATE

I hereby certify that this correspondence is being deposited with the United Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on 02/09/2005

  
Kenneth H. Johnson

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

In Re: The Application of  
Willibrord A. Groten

Application No.: 10/015,863

Filed: 12/12/2001



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Attorney Docket No.: CDT 1756-2

Group Art Unit: 1764

Examiner: W.D. Griffin

For: Process for Sulfur Reduction in Naphtha Streams

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Terminal Disclaimer (Fee enclosed).  
☐ Sheets of formal drawings (in triplicate)  
☒ Petition for Extension of Time to Respond ( 1 month). (Fee enclosed).  
☒ No additional fee is required.  
☐ The fee has been calculated as shown below

(Col. 1)	Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PRESENT PREVIOUSLY PAID FOR	EXTRA	RATE ADDIT. FEE	RATE ADDIT. FEE
TOTAL * 6 MINUS ** 20 = 0			x 9 = \$	x 18 = \$
INDEP * 1 MINUS ** 3 = 0			x 44 = \$	x 88 = \$
<input type="checkbox"/> FIRST PRESENT. OF MULT. DEP. CLAIM			+150 = \$	+300 = \$
ADDIT. FEE			TOTAL \$ _____	OR TOTAL \$ _____

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col.3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

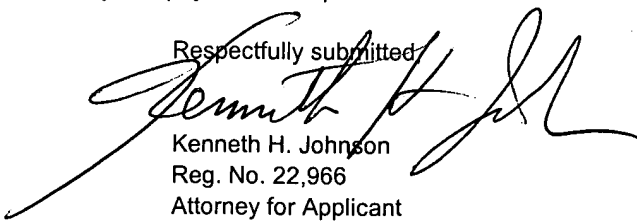
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. 10-0740 in the amount of \$ \_\_\_\_\_. A duplicate of this sheet is enclosed.

☒ A check for \$ 120.00 (Pet. For Extension of Time to Respond (1 Month) is enclosed.

☐ The Commissioner is hereby authorized to credit any overpayment to Deposit Account No. 10-0740.

Respectfully submitted,

  
Kenneth H. Johnson  
Reg. No. 22,966  
Attorney for Applicant  
P.O. Box 630708  
Houston, Texas 77263  
Tel.: (713) 780-7047  
Fax.: (713) 780-7671

DATE: 02/09/2005